

County: Monroe  
 SPARTA NURSING HOME  
 310 WEST MAIN STREET

Facility ID: 8480

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SPARTA 54656 Phone: (608) 269-2132  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? Yes  
 Number of Beds Set Up and Staffed (12/31/01): 30  
 Total Licensed Bed Capacity (12/31/01): 30  
 Number of Residents on 12/31/01: 29

Ownership:  
 Highest Level License:  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 29

Nonprofit Church/Corporation  
 Skilled

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No					1 - 4 Years	31.0		
Supp. Home Care-Personal Care	No					More Than 4 Years	34.5		
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0		34.5		
Day Services	No	Mental Illness (Org./Psy)	24.1	65 - 74	10.3				
Respite Care	No	Mental Illness (Other)	3.4	75 - 84	24.1				100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	58.6	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	3.4	95 & Over	6.9	Full-Time Equivalent			
Congregate Meals	No	Cancer	6.9			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	24.1		100.0	(12/31/01)			
Other Meals	No	Cardiovascular	3.4	65 & Over	100.0				
Transportation	No	Cerebrovascular	10.3			RNs			8.4
Referral Service	No	Diabetes	0.0	Sex	%	LPNs			4.7
Other Services	No	Respiratory	0.0			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	24.1	Male	13.8	Aides, & Orderlies			
Mentally Ill	No			Female	86.2				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

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#### Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi- dents	% Of All
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	
Int. Skilled Care	1	50.0	287	1	5.3	130	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2
Skilled Care	1	50.0	287	14	73.7	110	0	0.0	0	7	87.5	136	0	0.0	0	0	0.0	0	22
Intermediate	---	---	---	4	21.1	90	0	0.0	0	1	12.5	132	0	0.0	0	0	0.0	0	5
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Total	2	100.0		19	100.0		0	0.0		8	100.0		0	0.0		0	0.0		29

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	8.0	Daily Living (ADL)	Independent			
Private Home/With Home Health	4.0	Bathing	10.3	48.3	41.4	29
Other Nursing Homes	4.0	Dressing	24.1	58.6	17.2	29
Acute Care Hospitals	68.0	Transferring	55.2	31.0	13.8	29
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	41.4	41.4	17.2	29
Rehabilitation Hospitals	0.0	Eating	86.2	3.4	10.3	29
Other Locations	16.0	*****				
Total Number of Admissions	25	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	3.4	Receiving Respiratory Care		0.0
Private Home/No Home Health	19.2	Occ/Freq. Incontinent of Bladder	34.5	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	23.1	Occ/Freq. Incontinent of Bowel	13.8	Receiving Suctioning		0.0
Other Nursing Homes	7.7			Receiving Ostomy Care		0.0
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding		3.4
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		37.9
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	50.0	With Pressure Sores	3.4	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	20.7	Medications		
(Including Deaths)	26			Receiving Psychoactive Drugs		65.5

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Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

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	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.7	88.1	1.10	84.6	1.14
Current Residents from In-County	96.6	83.9	1.15	77.0	1.25
Admissions from In-County, Still Residing	36.0	14.8	2.43	20.8	1.73
Admissions/Average Daily Census	86.2	202.6	0.43	128.9	0.67
Discharges/Average Daily Census	89.7	203.2	0.44	130.0	0.69
Discharges To Private Residence/Average Daily Census	37.9	106.2	0.36	52.8	0.72
Residents Receiving Skilled Care	82.8	92.9	0.89	85.3	0.97
Residents Aged 65 and Older	100.0	91.2	1.10	87.5	1.14
Title 19 (Medicaid) Funded Residents	65.5	66.3	0.99	68.7	0.95
Private Pay Funded Residents	27.6	22.9	1.20	22.0	1.25
Developmentally Disabled Residents	0.0	1.6	0.00	7.6	0.00
Mentally Ill Residents	27.6	31.3	0.88	33.8	0.82
General Medical Service Residents	24.1	20.4	1.18	19.4	1.24
Impaired ADL (Mean)*	39.3	49.9	0.79	49.3	0.80
Psychological Problems	65.5	53.6	1.22	51.9	1.26
Nursing Care Required (Mean)*	8.2	7.9	1.03	7.3	1.12